

PREA AUDIT REPORT Interim Final
ADULT PRISONS & JAILS

Date of report: April 22, 2017

Auditor Information			
Auditor name: Delbert Longley			
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Email: dklongley01@gmail.com			
Telephone number: (641)203-3804			
Date of facility visit: April 12-14, 2017			
Facility Information			
Facility name: Wyoming Correctional Facility			
Facility physical address: 3203 Dunbar Road, Attica, NY 14011			
Facility mailing address: <i>(if different from above)</i> Click here to enter text.			
Facility telephone number: (585)591-1010			
The facility is:	<input type="checkbox"/> Federal	<input checked="" type="checkbox"/> State	<input type="checkbox"/> County
	<input type="checkbox"/> Military	<input type="checkbox"/> Municipal	<input type="checkbox"/> Private for profit
	<input type="checkbox"/> Private not for profit		
Facility type:	<input checked="" type="checkbox"/> Prison	<input type="checkbox"/> Jail	
Name of facility's Chief Executive Officer: Thomas J. Sticht			
Number of staff assigned to the facility in the last 12 months: 573			
Designed facility capacity: 1714			
Current population of facility: 1392			
Facility security levels/inmate custody levels: Medium			
Age range of the population: 18-77			
Name of PREA Compliance Manager: Timothy Franclemont		Title: Assistant Deputy Superintendent	
Email address: Tim.Franclemont@doccs.ny.gov		Telephone number: (716)937-4000 ext 2160	
Agency Information			
Name of agency: New York State Department of Corrections and Community Supervision			
Governing authority or parent agency: <i>(if applicable)</i> Click here to enter text.			
Physical address: 1220 Washington Ave., Albany, NY 12226-2050			
Mailing address: <i>(if different from above)</i> Click here to enter text.			
Telephone number: (518)457-8126			
Agency Chief Executive Officer			
Name: Anthony J. Annucci		Title: Acting Commissioner	
Email address: commissioner@doccs.ny.gov		Telephone number: (518)457-8134	
Agency-Wide PREA Coordinator			
Name: Jason D. Effman		Title: Associate Commissioner	
Email address: Jason.effman@doccs.ny.gov		Telephone number: (518)457-3955	

AUDIT FINDINGS

NARRATIVE

The audit of the Wyoming Correctional Facility (WCF), Attica, New York was conducted on April 12-14, 2017 by Delbert Longley, Certified PREA Auditor in order to determine compliance with the Prison Rape Elimination Act (PREA) standards. An entrance meeting was held to introduce the PREA audit team on April 12, 2017. Superintendent Thomas Sticht, PREA Coordinator Jason Effman, PREA Compliance Manager Tim Franclemont, DSA Sandra Durfee, DSP Julie Wolcott, DSS Christopher Yehl, Captain Tim Heath, CFOS Joe Lang, CFOS Dawn Butler, and PREA Auditor Delbert Longley present. A tour of the facility was completed, taking approximately five(5) hours to complete. Several areas were observed on the tour including academic building, counselor room, east dormitory units, transitional services, vocational services, horticultural greenhouses, maintenance, commissary, state shop, laundry, storehouse, mess hall, hospital, dental office, activities building including library, law library, chaplain's office, gym, dorms, SHU, visitation room, and package room. Informal interviews were completed with staff and inmates throughout the tour.

The auditor attended and spoke with third (3rd) shift staff at shift briefing on April 12, 2017 at 1445 hours. The auditor also met with second shift staff at shift briefing on April 13, 2017 at 0645 hours. The auditor spoke briefly to each group, introduced himself, thanked staff for their dedication, work, and efforts to be PREA compliant.

An inmate roster was obtain and a random sampling of inmates were chosen. Attention was paid to special populations within the facility. Information in regards to zero tolerance for sexual abuse and harassment was posted throughout the entire facility. Most inmates interviewed stated they understood PREA and how to report allegations of sexual abuse and harassment. Only one gay inmate was identified, a legally blind, a disabled inmate confined to a wheel chair were also identified and were interviewed. A Hispanic inmate was interviewed. He claims he understands and speaks English, although this auditor questions how well he understands. After some effort by this auditor, this inmate did acceptable during the interview. The other inmates discussed also did acceptable during the interview process.

Formal staff interviews were completed with the PREA Coordinator, PREA Compliance Manager, Superintendent, Human Resources, Health Services, Shift Supervisors, PREA Investigators, Security Staff, Counselors, and Unit Managers. Staff from all three shifts were interviewed. Administrative staff, Shift Supervisors, Investigators, Health Services, Counselors, and Unit Managers were knowledgeable and very willing to assist.

A total of 129 formal and informal interviews were completed with staff and inmates. Three inmates refused to speak with me for various reasons. Security staff were friendly and willing to participate in the PREA audit. Most staff are aware of the proper protocols and procedures to handle an emergency in the proper manner and in a timely fashion. However, a significant number of security staff initially responded that they would notify their supervisor upon learning that an inmate had been sexually abused and only elaborated on specific response protocols upon further follow-up questioning.

PREA case log/data and investigative files were reviewed. Investigations are handle by Office of Special Investigation (OSI), formerly IG. Bureau of Criminal Investigations(BCI) assist when requested, and if potential of criminal charges exist. Investigations are thoroughly and promptly completed, and attention is given to details. Any case that could result in criminal charges are referred to the County Prosecutors. All decisions are based on the evidence that has been collected. A review of investigations documentation provide assurances of quality investigations.

The overall audit process went smoothly, was productive, and educational. The Administration and Staff at the WCF are doing many things right. For example, on the first day of the audit during the tour, two items were noted by the auditor and discussed at close out that afternoon. The two issues were completely and very adequately addressed by mid morning on Friday. The culture at WCF is one of safety and security for inmates and staff. The auditor found WCF exceeds standards on four standards and meets all the remaining standards. A close out meeting was held on April 14, 2017 with Superintendent Thomas Sticht, PREA Compliance Manager Tim Franclemont, DSA Sandra Durfee, DSP Julie Wolcott, DSS Christopher Yehl, Captain Time Heath PREA Auditor Delbert Longley, several department leaders, supervisors, and staff present.

DESCRIPTION OF FACILITY CHARACTERISTICS

Wyoming Correctional Facility (WCF), 3203 Dunbar Road, Attica, NY 14011 is male facility housing with a capacity of 1714 inmates in 124 buildings, including 1360 general population beds, and 32 Special Housing Unit beds 950 beautiful acres in upstate New York. Other areas include visiting room, hospital, food service and dining hall, three buildings housing vocational/academic/horticultural, maintenance, laundry, commissary, gymnasium and activities area, and draft processing.

WCF has 573 employees including 197 weekday post, 181 weekend post, 23 Sergeants, 10 Lieutenants, and two Captains. Inmates at WCF range in age 18-77, with an average length of stay is 39 months, and average inmate age is 35.5 years.

WCF inmates are offered several programs designed to improve their employment potential upon release. Programs include Academic Education, Vocational, Volunteer Services, Counseling, drug treatment (ASAT), aggression replacement training (ART), High School Equivalency (HSE), Transitional Services, General and Law Library, and work assignments. WCF is home to the largest recycling program with in the New York Department of Correction and Community Supervision; has two work crews, and an inmate fire brigade.

SUMMARY OF AUDIT FINDINGS

115.14 Does not apply. WCF does not house any offender under the age of 18.

Number of standards exceeded: 5

Number of standards met: 37

Number of standards not met: 0

Number of standards not applicable: 1

Standard 115.11 Zero tolerance of sexual abuse and sexual harassment; PREA Coordinator

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

Wyoming Correctional Facility has directives and employee rules addressing zero tolerance to all sexual misconduct between inmates and staff.

Standard 115.12 Contracting with other entities for the confinement of inmates

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

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WCF has directives in place requiring all contractors or any agency they may have a contract with have a zero tolerance policy regarding sexual misconduct.

Standard 115.13 Supervision and monitoring

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

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WCF has directives in place governing unannounced rounds, the use of technology, staffing levels. Documentation has been reviewed to support the directives.

Standard 115.14 Youthful inmates

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

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WCF has a directive in place that only inmates 18 years of age and older will be held.

Standard 115.15 Limits to cross-gender viewing and searches

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

WCF has directives in place on the proper method of completing searches. Only medical personal will be allow to complete a body cavity search, searches for the sole purpose of determining genital status, and cross gender searches shall not be conducted except in the case of extreme circumstances. Inmates are to given the respect of privacy to the extent possible while maintaining security when showering, changing clothes, or performing bodily functions unless they choose to complete these activities in the known view of staff and inmates.

Standard 115.16 Inmates with disabilities and inmates who are limited English proficient

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

WCF provides interpreters and or translator for those inmates that are LEP, have pamphlets available in eight (8) languages to inform new and current inmates of zero tolerance concerning sexual abuse and harassment at WCF. Documentation was reviewed to support directives. Videos have received national recognition.

Standard 115.17 Hiring and promotion decisions

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

WCF has directives in place to complete background checks on all new employees and those wishing to be considered for promotion. Documentation has been reviewed for these. NYDOCCS has implemented a notification system that notifies NYDOCCS when an employee is arrested. This system gives immediate notification regardless of where the arrest was made.

Standard 115.18 Upgrades to facilities and technologies

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

Directive in place to require consideration. Upgrade decisions are made by NYDOCCS home office in Albany, NY. Each facility can make requested based on their needs including the incident review of any sexual misconduct with in the facility. NYDOCCS is encouraged to implement more technology to assist facility staff.

Standard 115.21 Evidence protocol and forensic medical examinations

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

SAFE/SANE is available on a 24/7 basis. NYDOCCS, Office of Special Investigations, Sex Crimes Division, New York State Police, Bureau of Criminal Investigation shall work cooperatively on inmate/inmate and inmate/staff sex crimes.

Standard 115.22 Policies to ensure referrals of allegations for investigations

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

Directives require outside LE Investigators to be contacted when appropriate and needed. DOCCS has a dedicated Sex Crimes Division within the Office of Special Investigations. The investigators take the investigative lead and have full arrest powers.

Standard 115.31 Employee training

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

WCF has directives in place, training curriculum developed for staff and inmates, and documentation to support the training has been completed.

Standard 115.32 Volunteer and contractor training

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

WCF has directives in place to ensure contractors and volunteers are trained in accordance to PREA Standards requirements.

Standard 115.33 Inmate education

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

WCF has directives, training and notice material in several languages, and document of an received training at intake. NYDOCCS has developed several PREA training video that are recognized nationally.

Standard 115.34 Specialized training: Investigations

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

WCF has directives and training curriculum in place to train investigators to conduct sexual abuse investigations. Training includes Garrity and Miranda. WCF utilizes OSI to complete all investigation. OSI investigator has received training beyond what the minimum requirements are to be a sex offense investigator.

Standard 115.35 Specialized training: Medical and mental health care

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

WCF have directives to ensure medical and mental health staff have been trained in PREA requirements. WCF has a MOU with Office of Mental Health to provide service to WCF inmates.

Standard 115.41 Screening for risk of victimization and abusiveness

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

WCF has directives and rules in place to complete a risk screening at intake and within 30 days. Draft was observed and PREA questions were asked of each inmate.

Standard 115.42 Use of screening information

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

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WCF have directives to ensure transgender and intersex inmates have an opportunity to shower separately. Screening tool is in place to assist with classification process.

Standard 115.43 Protective custody

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

WCF has directives requiring inmates in voluntary and involuntary protective custody the opportunity to participate in activities that inmate in general housing have. Staff is required to review the protective custody status at a minimum of once every 30 days.

Standard 115.51 Inmate reporting

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

An offender at WCF has the ability to report to any staff or to an outside entity, the New York State Commissions on Corrections agreeing to receive third party reports. JDI Resource Guide outlines the confidential resources available to offenders that are victims of sexual violence. #77 is a confidential rape crisis and support hotline number that can be used to report.

Standard 115.52 Exhaustion of administrative remedies

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

WCF does not require inmates to file a grievance about sexual abuse or sexual harassment to satisfy the Prison Litigation Reform Act (PLRA). If an inmate chooses to make a complaint of sexual abuse or sexual harassment via grievance, the matter is referred to the normal PREA reporting and investigation process and the grievance is closed.

Standard 115.53 Inmate access to outside confidential support services

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

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WCF directives provide for inmates to have access to outside support services. A copy of the contract between WCF and RESTORE Sexual Assault Services, a Program of Planned Parenthood of Central and Western New York, Rochester, NY.

Standard 115.54 Third-party reporting

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

WCF website and flyers provide methods that a third party allegation can be reported.

Standard 115.61 Staff and agency reporting duties

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

WCF directives require all staff, contractors, volunteers to promptly report any allegation of sexual abuse or retaliation. WCF has an MOU with Office of Mental Health to provide assistance to any inmate needing counseling.

Standard 115.62 Agency protection duties

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

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WCF directives require immediate investigation, immediate move to voluntary or involuntary protective custody if no other options are available to protect an inmate. Those that are in protective custody shall have their status reviewed at least every 30 days.

Standard 115.63 Reporting to other confinement facilities

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

WCF directives require notice to be given to another agency if an inmates reports they were the victim of sexual assault while housed in another facility.

Standard 115.64 Staff first responder duties

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

WCF has directives on how to respond and most staff were able to verbalize the process effectively. Staff have pocket cards and supervisors have been provided quick reference guides for their use.

Standard 115.65 Coordinated response

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

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WCF has a detail response plan for all staff to ensure the victim's need is addressed.

Standard 115.66 Preservation of ability to protect inmates from contact with abusers

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

WCF contracts with the respective unions appear to have expired. It is also noted that the contracts continue to be effective until a new contract is signed after the expiration of the effective date. The union contracts shall not override PREA Standards.

Standard 115.67 Agency protection against retaliation

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

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WCF has a directive and rules setting forth guidelines concerning protection against retaliation. Documentation was reviewed and appears to be conducted and completed well.

Standard 115.68 Post-allegation protective custody

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

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WCF directives allow for post allegation protective custody, however must meet some compelling reason to continue the protective custody.

Standard 115.71 Criminal and administrative agency investigations

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

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WCF has directives and policies that provide for the parameters of the investigation, who should conduct the investigation (internal/external), documentation required. Training curriculum has been developed for all investigators training. After reviewing investigative reports and visiting with investigators, the investigations are completed thoroughly and timely.

Standard 115.72 Evidentiary standard for administrative investigations

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

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WCF has a directive and policy addressing the level of evidence needed in an administrative investigation.

Standard 115.73 Reporting to inmates

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

WCF has directives and policy in place requiring that an offender who has made an allegation, be informed of the outcome of the investigation to include if the case has been unsubstantiated, substantiated, unfounded and the remedy, either administrative or criminal charges are being filed.

Standard 115.76 Disciplinary sanctions for staff

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

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WCF has directives and policy in place to ensure sanctions are given to staff that violate the directives and policy.

Standard 115.77 Corrective action for contractors and volunteers

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

WCF have directives and policy in place to ensure sanctions are given to volunteers and contractors that violate the directives and policy. Documentation of sanctions has been reviewed.

Standard 115.78 Disciplinary sanctions for inmates

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

WCF has directives and policy in place to ensure sanctions are given to inmates that violate the directives and policy.

Standard 115.81 Medical and mental health screenings; history of sexual abuse

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

WCF has a directive and a form to coincide that provides staff with good initial screening to both, current offenders and newly transferred to WCF. Documentation supporting directives was reviewed.

Standard 115.82 Access to emergency medical and mental health services

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

WCF has directives in place to guide staff in providing medical and mental health care for the victim. A list of SANE/SAFE hospitals is available to determine the closest and available medical center for the victim to be transfer to.

Standard 115.83 Ongoing medical and mental health care for sexual abuse victims and abusers

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

WCF directives provide for incident reviews by a three member team. Documentations was reviewed that supports directives to determine if further action of necessary. WCF has an MOU with OMH for continued support services.

Standard 115.86 Sexual abuse incident reviews

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

WCF directives provide for incident reviews by a three member team within 30 days of the close of the investigation. Documentations was reviewed that supports directives to determine if further action of necessary. Discussion with staff on the Incident Review Team supports directives.

Standard 115.87 Data collection

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

WCF directives and PREA Standards require monthly data collection reports. WCF completes monthly and annual reports to review substantiated allegations, corrective actions and to measure progress.

Standard 115.88 Data review for corrective action

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

WCF has completed the annual report and the report is available for review.

Standard 115.89 Data storage, publication, and destruction

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

WCF directives require the reports to be maintained for a period of at least 10 years.

AUDITOR CERTIFICATION

I certify that:

- The contents of this report are accurate to the best of my knowledge.
- No conflict of interest exists with respect to my ability to conduct an audit of the agency under review, and
- I have not included in the final report any personally identifiable information (PII) about any inmate or staff member, except where the names of administrative personnel are specifically requested in the report template.

Delbert G. Longley

April 22, 2017

Auditor Signature

Date